

EXHIBIT 3

**BILL OF LADING — PRIVATELY OWNED
PERSONAL PROPERTY****B/L
NO. ZY-711231**

1. TRANSPORTATION COMPANY (& agent) TENDERED TO Day Transfer Company (LONE STAR RELOCATION SERVICES, INC)		2. SCAC DAYY	3. SERVICE CODE 1A	4. SHIPMENT NO. 1 OF 2	5. DATE B/L PRINTED 18-MAY-04
6. REQUESTED PACKING DATE 02-JUN-04	7. REQUESTED PICKUP DATE 04-JUN-04	8. REQUIRED DELIVERY DATE 17-JUN-04	9. PRIVACY ACT DATA (5 USC 552a) This form serves as a procurement, accountability and payment form in the shipment of privately owned personal property for the account of the U. S. Information thereon may be used to prepare related documents or collect excess costs. Disclosure of information is voluntary but its absence may preclude shipment of property.		
13. EXTRA PICKUP/DELIVERY (Complete address) SERVICE NOT APPLICABLE			10. PROPERTY OWNER'S NAME, SOCIAL SECURITY NO., RANK AND PAY GRADE YORK, JASON D [REDACTED] MAJ O-4 PCS WD		
			11. AUTHORITY FOR SHIPMENT (Order No. Par. No., HQ) 1320 USMC 4TH RECON BN SA		12. DATE OF ORDER 09-FEB-04
			14. DEPARTMENT/AGENCY US - MC		15. TRANSPORTATION CONTROL NO.
16. Received by the transportation company named above, the property hereinafter described, in apparent good order and condition (contents and value unknown), to be forwarded to destination by the said company and connecting lines, there to be delivered in like good order and condition to said consignee. This bill of lading is governed by the regulations relating thereto as published in Title 41, Part 102-118 of the Code of Federal Regulations. Terms and Conditions are also contained in the Tender of Service.			17. FULL NAME OF SHIPPER JPPSO-SAN ANTONIO		
18. CONSIGNEE (Name and destination delivery address) (See block 13) MAUREEN V YORK AGENT NEWPORT (NEWPORT) RI US15 02840			19. FROM (Complete address of point of pickup) (See block 13.) 2721 ASHLEY MEADOW - ASHLEY PLACE SUBDIV SCHERTZ (GUADALUPE) TX 78154 US68 RA:MAUREEN YORK		
20. RESPONSIBLE DESTINATION INSTALLATION/OFFICE NAVAL STATION NEWPORT RI RI 02841-1510 401-8412091			21. BILL CHARGES TO (Dept./Agcy., Bur./Off., and complete mailing address) COMPT TRAN VOUCH CERT BRANCH (TVCB) ATTN CODE 470 814 RADFORD BLVD STE 20318 ALBANY, GA 31704-0318		
22. VIA (Name of interlining carriers)			23. FOR CARRIER USE ONLY - WAYBILL/FREIGHT BILL NO.		
			24. APPROPRIATION CHARGEABLE 1741105.2753 44690 000027 265550695 74152 74154		
25. REMARKS (Special services, use reverse) THIS SHIPMENT CONTAINS FIREARMS-BEFORE EFFECTING DELIVERY TO RESIDENCE OR PLACING IN STORAGE, THE CARRIER SHALL NOTIFY THE PPSO SPECIFIED IN BLOCK 20-					

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26. PACKAGES NO. KIND		27. DESCRIPTION OF SHIPMENT* (Specify)	28. WEIGHT + GROSS 58,140 TARE 46,290 NET 11,850 + incl. professional books, papers, and equipment weighing:	FOR USE OF DESTINATION CARRIER ONLY		
1	LOT			DOD SPONSORED HOUSEHOLD GOODS	SERVICES LINE-HAUL TRANSPORTATION	29. RATE
				PACKING/UNPACKING		
				OTHER/ACCESSORIAL SERVICES		
				TOTAL		
				31. TARIFF OR SPECIAL RATE AUTHORITIES RS D-8 - 160%		
* Issued at lowest valuation cited in appropriate tender or tariff unless otherwise stated hereon.		B/L NO. ZY-711231		32a. ISSUING OFFICER (Name and Title) JAMES F MCGOVERN JR, COL, USAF DIRECTOR		
CERTIFICATE FOR RECEIPT OF SHIPMENT AND ORIGINAL BILL OF LADING				32b. ISSUING OFFICE (Name and Complete address) GBLOC HAFC JPPSO-SAN ANTONIO 613 NORTHWEST LOOP 410 SUITE 400 SAN ANTONIO TX 78216-5518		
33a. NAME OF TRANSPORTATION COMPANY Day Transfer Company (LONE STAR RELOCATION SERVICES, INC)		33b. DATE OF RECEIPT OF SHIPMENT		34. FOR USE OF PAYING OFFICER (Does not affect carrier charges)		
33c. SIGNATURE OF AGENT/DRIVER		33d. PER		UNAUTHORIZED ITEMS EXCESS VALUATION		
				EXCESS DISTANCE EXCESS WEIGHT		
				OTHERS (Explain under remarks)		
CERTIFICATE OF CARRIER BILLING FOR CHARGES - CONSIGNEE MUST NOT PAY ANY CHARGES ON THIS SHIPMENT						
35a. ON (Date)	35b. AT (Actual delivery point) + +		35c. THE (Name of delivery carrier)			
35d. DELIVERED THIS CONSIGNMENT TO <input type="checkbox"/> STORAGE IN TRANSIT <input type="checkbox"/> RESIDENCE		35e. COMPLETE AND IN APPARENT GOOD ORDER EXCEPT AS MAY BE INDICATED HEREAFTER		<input type="checkbox"/> SHORTAGE <input type="checkbox"/> DAMAGE <input type="checkbox"/> CARRIER OS&D REPORT ATTACHED		
35f. NAME OF DESTINATION CARRIER (Carrier authorized to bill charges)				35g. SIGNATURE OF CARRIER'S AUTHORIZED AGENT		

+ + Carrier to execute and attach Certificate of Storage and Liability for shipment placed in storage in transit

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